NOMINATION FORM*

Governor's Professor of the Year Award

er	Rank/Title_		
	Department		
		Office Phone #	
		Home Phone #	
		E-Mail Address	
perience at Present Inst	titution:		years
Full-time Teaching Experience at Other Institutions:		ye	
I	DEGREES HELD		
<u>Degree</u>	Academic Discipline		Year Conferred
OTHER SIG	SNIFICANT COURS	SEWORK	
Degree Sought (If applicable)			<u>Years</u>
vide course titles and o	credit/contact hour loa	ad, including number	
	perience at Present Ins perience at Other Instit Degree OTHER SIG Degree Sought (If applicable) URSES TAUGHT A vide course titles and of	Department	Department Office Phone # Home Phone # E-Mail Address perience at Present Institution: perience at Other Institutions: DEGREES HELD Degree Academic Discipline OTHER SIGNIFICANT COURSEWORK Degree Sought Academic Discipline

^{*}Note: Letters of transmittal are unnecessary and will be discarded.

EVIDENCE OF EXCEPTIONAL TEACHING PERFORMANCE

Please attach no more than five 8½" x 11" pages (single sided) of material in support of your nominee. Appropriate evidence of exceptional teaching performance may include, but is not limited to, statements or other evidence submitted by current or former students, faculty members, staff, and administrators; student evaluations (if used); lists of teaching awards; copies of news and magazine articles about the nominees instructional skills and techniques; pre- to post-test gains in student outcomes; and results of advising students and career-tracking graduates. Supporting materials should be easily readable and should not be severely reduced when copied. Such materials in excess of five 8½" x 11" pages are penalized.

OTHER PROFESSIONAL ACTIVITIES

grants, publications, a	, briefly summarize the nominee's most significant committee assignment and/or activities related to academic advisement, faculty development, publications. Be selective. Do not alter this form or append additional page.	olic service,
I nominate Year.	as our institution's candidate for the Governor's Prof	fessor of the
	Signature of the President	Date
	Must be received by June 30, 2006	
	Address to:	
	R. Lynn Kelley, Ph.D. Assistant Director Division of Academic Affairs and Licensing South Carolina Commission on Higher Education	

South Carolina Commission on Higher Education 1333 Main Street, Suite 200 Columbia, South Carolina 29201